

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| OMB APPROVAL | | | | | | |
|--------------------------|--------|--|--|--|--|--|
| OMB Number: 3235-0076 | | | | | | |
| Expires: May 31, 2005 | | | | | | |
| Estimated Average burden | | | | | | |
| hours per form | | | | | | |
| 16.00 | | | | | | |
| SEC USE | ONLY | | | | | |
| Prefix | Serial | | | | | |
| | | | | | | |
| DATE REC | EIVED | | | | | |
| | | | | | | |

| Name of Offering (check if the Theseus Energy Onshore (QP), LP | s is an amendment and name | has changed, and in | dicate change.) | | |
|--|---------------------------------|---|--------------------|-------------------------------------|--------------|
| Filing Under (Check box(es) that app Type of Filing: New Filin | ly): Rule 504 | Rule 505 | Rule 506 | Section 4(6) | ULPROCESSED |
| | A. | BASIC IDENTIF | ICATION DATA | | JUL 26 2004 |
| 1. Enter the information requested al | oout the issuer | | | | 2007 |
| Name of issuer (check if the C | is is an amendment and name | has changed, and in | ndicate change.) | | FINANCIAL C |
| Address of Executive Offices 1221 Lamar, Suite 1220, Houston, | • | ber and Street, City | , State, Zip Code) | Telephone Number (In (713) 751-9900 | |
| Address of Principal Business Opera (if different from Executive Offices) | ions (Num | ber and Street, City | , State, Zip Code) | Telephone Number (In | |
| Brief Description of Business | Investment Partnership | | | | |
| Type of Business Organization corporation business trust | · . | ship, already formed | j | other (please sp | ecity): |
| Actual or Estimated Date of Incorpor Jurisdiction of Incorporation or Orga | nization: (Enter two-letter U.S | Month 1 2 3. Postal Service Ab N for other foreign j | | | stimated T X |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| 2 Protection in Community | 16 16 | | TIFICATION DATA | | |
|-----------------------------------|------------------------|-------------------------------------|-------------------------------------|-------------------------|-------------------------------------|
| | on requested for the f | * | | | |
| 1 | | r has been organized within the | | | |
| | | r to vote or dispose, or direct the | | | |
| | | orporate issuers and of corporat | te general and managing partner | 's of partnership issue | rs; and |
| | nanaging partner of | 7- | | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | |
| Theseus Energy Capital Man | | | | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| 1221 Lamar, Suite 1220, Hou | ston, Texas 77010 | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or ** Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | |
| | | us Energy Capital Manageme | nt, LP) | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| 1221 Lamar, Suite 1220, Hou | ston, Texas 77010 | | | | |
| Check Box(es) that Apply: | Promoter Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | |
| Brion Scott McKenna | | | | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| 1221 Lamar, Suite 1220, Hou | ston, Texas 77010 | | | | |
| Check Box(es) that Apply: | Promoter Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if i | ndividual) | | | | |
| Sandeep S. Sachdeva | | | | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| 1221 Lamar, Suite 1220, Hou | ston Texas 77010 | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if | individual) | · | | | |
| | | | | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or |
| Full Name (Last name first, if i | ndividual) | | | | Managing Partner |
| Land traine tribig it is | , | | | | |
| Business or Residence Address | (Number and Stree | et, City, State, Zip Code) | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if it | ndividua!) | | | | managing I arrier |
| Business or Residence Address | (Number and Street | et, City, State, Zip Code) | | | |
| | (Use I | plank sheet, or copy and use add | litional copies of this sheet, as r | necessary.) | |

| 3. | Has the issue What is the m * Subje Does the offe Enter the int | ninimum in | vestment th | | | ı-accredited | | | | | | | | Yes | No |
|--------|---|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------|-------------------------------|-------------------------------|------------------------------|------------------------------|---|------------------------------|----------------------|--------------------|----------------|
| 2. | What is the n * Subjection Does the offe | ninimum in | vestment th | | | -accredited | | | | | | | | _ | 14-1 |
| 3. | * Subjection Does the offer | | | at will be a | Answer | | | | | | | | | | X |
| 3. | * Subjection Does the offer | | | at will be a | | | | | ling under l | | | | | | |
| | | | | ral Partnei | | m any indiv | /idual? | | | | ••••• | ************* | | | |
| 4. | Enter the int | ring permit | joint owner | rship of a si | ingle unit?. | | | ************** | | | | | ************** | Yes . \square | No X |
| | remuneration agent of a broto be listed ar | for solicita oker or deal | ition of pur er registere | chasers in c d with the S | connection SEC and/or | with sales of with a state | of securities e or states, | s in the offi list the nar | ering. If a ne of the br | oerson to be | e listed is a der. If mor | n associate | d person o | r | |
| Full 1 | Name (Last na | me first, if | individual) | | | | | | | | | | | | |
| | Applicable | | | | | | | | | | | | | | |
| Busir | ness or Reside | nce Addres | s (Number | and Street, | City State, | Zip Code) | | | | | | | | | |
| Name | e of Associate | d Broker or | Dealer | | | | | | | | | | | | |
| State | s in Which Pe | rson Listed | Has Solicit | ed or Intend | ds to Solici | t Purchaser | s | | | | | | | | |
| | (Check "A | Il States" o | r check indi | vidual Stat | es) | | , | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | All Sta | ates |
| | [AL] [IL] [MT] | [AK] [IN] [NE] | [AZ] [IA] [NV] | [AR] [KS] [NH] | [CA] [KY] [NJ] | [CO] [LA] [NM] | [CT] [ME] [NY] | [DE] [MD] [NC] | [DC] [MA] [ND] | [FL] [MI] [OH] | [GA] [MN] [OK] | [HI] [MS] [OR] | [ID] [MO] [PA] | | |
| Full 1 | [RI] Vame (Last na | [SC] ime first, if | [SD] individual) | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] | | |
| | | | 01 1 | 10 | G1: 0: . | 7. 6.15 | | | | | | | | | |
| Busir | ness or Reside | nce Aggres | s (Number | and Street, | City State, | Zip Code) | | | | | | | | | |
| Name | e of Associate | d Broker or | Dealer | | | · | | | | | | | | | |
| State | s in Which Pe | rson Listed | Has Solicit | ed or Intend | ds to Solici | t Purchaser | s | | | | | | | | |
| | (Check "A | Il States" o | r check indi | vidual State | es) | ************** | | | **************** | | | | | All Sta | ates |
| | [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] | | |
| | [IL] [MT] | (IN) (NE) | [IA] [NV] | [KS] [NH] | [KY] [NJ] | [LA] [NM] | [ME] [NY] | [MD] [NC] | [MA] [ND] | [MI] [OH] | [MN] [OK] | [MS] [OR] | [MO] [PA] | | |
| | [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] | | |
| Full N | Name (Last na | ime first, if | individual) | | | | | | | | | | | | |
| Busir | ness or Reside | nce Addres | s (Number | and Street, | City State, | Zip Code) | | | | | | | | | - |
| Name | e of Associate | d Broker or | Dealer | | | | | · | | | | | | | |
| | | | | | | | | | | | | | | | |
| States | s in Which Pe | | | | | t Purchasers | 5 | | | | | | П | A 11 5 | |
| | | | | vidual State [AR] | | [CO] | [CT] | (DE) | IDC1 | (EI) | | | ID] | All Sta | ates |
| | [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [MO] [PA] [PR] | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\precedent{\precedent} \) and indicate in the columns below the amounts of securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt \$ Equity\$ ☐ Common ☐ Preferred Partnership Interests \$500,000,000 16,824,500.00 Other (Specify: Total \$500,000,000 16,824,500.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors \$16,824,500.00 Non-accredited Investors Total (for filings under Rule 504 only)....._____ N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by 3. the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of offering Type of Security Sold Rule 505 N/A N/A Regulation A. N/A N/A Rule 504 N/A N/A Total N/A N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees X Printing and Engraving Costs 2,000 Legal Fees × 20,000 X

8,000

0

30,000

X

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

Other Expenses (identify)

Total

CON127 AND 13/FOR FE3 40FF 1

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| | and total expenses furnished in response to Part | ate offering price given in response to Part C - Question I C - Question 4.a. This difference is the "adjusted gross | | \$ <u>499.</u> | 970,000 |
|------|--|---|-------|--|------------------------|
| 5. | of the purposes shown. If the amount for any pu | proceeds to the issuer used or proposed to be used for each rpose is not known, furnish an estimate and check the box ments listed must equal the adjusted gross proceeds to the 1.b above. | | | |
| | | | | Payments to Officers, Directors, and Affiliates | Payments to Others |
| | Salaries and fees | | | \$ | S |
| | Purchase of real estate | | | \$ | □ \$ |
| | Purchase, rental or leasing and installation of ma | chinery and equipment | | \$ | □ \$ |
| | Construction or leasing of plant buildings and fac- | cilities | | \$ | □ s |
| | Acquisition of other businesses (including the va may be used in exchange for the assets or securit | lue of securities involved in this offering that less of another issuer pursuant to a merger) | | \$ | □ s |
| | Repayment of indebtedness | | | \$ | □ s |
| | Working Real Estate | | | \$ | □ \$ |
| | Other (specify): Purchase and sell securities | | | \$ | ¥ \$499,970,000 |
| | Column Totals | | | \$ | \$499,970,000 |
| | Total Payments Listed (column totals added) | | | | × \$499,970,000 |
| | | D. FEDERAL SIGNATURE | | | |
| an u | | e undersigned duly authorized person. If this notice is filed ities and Exchange Commission, upon written request of it of Rule 502. | | | |
| lssu | er (Print or Type) | Signature | | Date | |
| The | eseus Energy Onshore (QP), LP | 334 34 | | July <u>15</u> , 200 | 4 |
| Nan | ne of Signer (Print or Type) | Title of Signer (Print or Type) | | | |
| San | deep S. Sachdeva | Member of Theseus Energy, LLC, General Partner of General Partner of Issuer | These | us Energy Capital | Management, LP, |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| E. STATE SIGNATURE | | |
|---|-----|------------|
| | | |
| | Yes | No |
| l.—Is any party described in 17 CFR 230.252(e), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule? | _🕀— | <u>-</u> ₩ |
| See Appendix, Column 5, for state response. | | |

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature | Date |
|---------------------------------|--|--------------------------------|
| Theseus Energy Onshore (QP), LP | >5/1/3/ | July <u>15</u> , 2004 |
| Name (Print or Type) | Title (Print or Type) | |
| Sandeep S. Sachdeva | Member of Theseus Energy, LLC, General Partner of Theseus General Partner of Issuer | Energy Capital Management, LP, |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | | APP | ENDIX | | | | | |
|-------|--------------------------------|--------------------------------------|--|--------------------------------------|--|--|----------|--|---------------|--|
| 1 | Intend to non-a investor | to sell accredited is in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | Limited Partnership Interests | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | |
| AL | | | | | | | | | | |
| AK | | | | | | | | | | |
| ΑZ | | ļ | | | | | | | | |
| AR | | | | | | | <u> </u> | | | |
| CA | | <u> </u> | | | | | | | | |
| СО | | | | | | | | | | |
| СТ | | X | \$500,000,000 | 1 | \$100,000.00 | 0 | 0 | N/A | N/A | |
| DE | | | | | | | | ! | | |
| DC | | | | | | | | | | |
| FL | | | | | | | | | | |
| GA | | | | | | <u> </u> | | { | | |
| HI | | | | | | | | | · | |
| ID | - | | | | | | | | | |
| IL | | | | | | | | | ļ | |
| IN | | | | | | | | ļ | | |
| ΙA | · | | | | | | | | | |
| KS | | | | | | | | | | |
| KY | | <u> </u> | | | | | | | | |
| LA | | <u> </u> | | | | | | | <u></u> | |
| ME | | - | | | | | | | | |
| MD | | | | | · | | | | | |
| MA | | | | | | | | | | |
| MI | | | | | | | | | , , , , , , , | |
| MN | ļ | | | | | | | | | |
| MS | ļ | | | | | | | | | |
| МО | | | | | | | | | | |
| MT | | | | | | | | | | |
| NE | | - | | | , | | | | ! | |
| NV | | ļ | | | | | | | | |
| NH | | <u> </u> | | | | <u> </u> | | | | |

Z00135 0001 NIFOT 253 1055 1

| | | | | API | PENDIX | | | | | | |
|-------|--|--------------------------|---|-------------------------|--|-------------|--------------|----------|--|--|--|
| Ĭ | Type of security Intend to sell and aggregate to non-accredited offering price | | | Type of investor and | | | | | 5 lification ate ULOE s, attach | | |
| | | rs in State 3-Item 1) | offered in state (Part C-Item 1) Limited Partnership | Number of Accredited | amount purchased in State (Part C-Item 2) Number of Number of | | | | waiver granted) (Part E-Item 1) | | |
| State | Yes | No | Interests | Investors | Amount | Investors | Amount | Yes | No | | |
| NJ | | ļ | | | | | | · | ļ | | |
| NM | | | | | | | | | | | |
| NY | | X | \$500,000,000 | 11 | \$1,500,000.00 | 0 | 0 | N/A | N/A | | |
| NC | | | | | | | | | | | |
| ND | | | | | | | i | | | | |
| ОН | | | | | | | | | | | |
| ОК | | | | | | | | | | | |
| OR | | | | | | | | | | | |
| PA | | | | | | | | - | | | |
| RI | | | | | | | | | | | |
| SC | | | | | | | | | | | |
| SD | | <u> </u> | | | | | <u> </u> | | | | |
| TN | | | | | | | | | | | |
| TX | | х | \$500,000,000 | 2* | \$15,224,500.00 | 0 | 0 | N/A | N/A | | |
| UT | | | | | | | | | | | |
| VT | | | | | | | | | | | |
| VA | | | | | | | | | | | |
| WA | | | | | | | | | | | |
| WV | | | | | | | | | | | |
| WI | | | | | | | 1 | | | | |
| WY | ļ | | | | | | | | | | |
| PR | | | | | | | | | | | |

^{*}Investment by general partner

400135 0001 B/ECT 555 1055 1